

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SER. NO. <u>10/690642</u> FILING DATE APPLICANT(S)
CLAIMS							
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		
	IND	DEP	IND	DEP	IND	DEP	
1	1		1				
2		1		1			
3		1		1			
4		1		1			
5		1		1			
6		5		1			
7		1		1			
8		①		1			
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50							
TOTAL IND.	7		12				
TOTAL DEP.		1		1			
TOTAL CLAIMS	24		13				

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